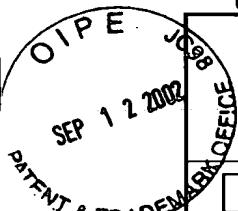


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 0.00)

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None
 Deposit Account

Deposit Account Number **08-3425**
 Deposit Account Name **Human Genome Sciences, Inc.**

The Commissioner is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
101	740	201	370
106	330	206	165
107	510	207	255
108	740	208	370
114	160	214	80
SUBTOTAL (1)		(\$)	0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	-20** =	<input type="text"/>	<input type="text"/>	x	<input type="text"/>	=	<input type="text"/>
Independent Claims	-3** =	<input type="text"/>	<input type="text"/>	x	<input type="text"/>	=	<input type="text"/>
Multiple Dependent							<input type="text"/>

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
103	18	203	9
102	84	202	42
104	280	204	140
109	84	209	42
110	18	210	9
SUBTOTAL (2)		(\$)	0.00

** or number previously paid, if greater; For Reissues, see above

Complete if Known

Application Number	09/921,143-Conf. #6449
Filing Date	August 3, 2001
First Named Inventor	Timothy A. Coleman
Examiner Name	Not Yet Assigned
Group Art Unit	1653
Attorney Docket No.	PF112P6

RECEIVED

FEE CALCULATION (continued)

SEP 16 2002

TECH CENTER 1600/2900

Fee Description Fee Paid

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	400	216	200
117	920	217	460
118	1,440	218	720
128	1,960	228	980
119	320	219	160
120	320	220	160
121	280	221	140
138	1,510	138	1,510
140	110	240	55
141	1,280	241	640
142	1,280	242	640
143	460	243	230
144	620	244	310
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	740	246	370
149	740	249	370
179	740	279	370
169	900	169	900
Other fee (specify)			
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3)	(\$ 0.00)

SUBMITTED BY

Name (Print/Type)	Michele M. Wales	Registration No. (Attorney/Agent)	43,975	Telephone	(301) 610-5772
Signature	<i>Michele M. Wales</i>			Date	September 12, 2002